## Do not send entire page - cut form at dashed line.

FORM VA-16 (DOC ID 316)  EMPLOYER'S QUARTERLY RECONCILATION AND RETURN OF VIRGINIA INCOME TAX WITHHELD  Please do not fold or staple  VA Department of Taxation P.O. BOX 27264, RICHMOND, VA 23261-7264 FOR INFORMATION CALL 804-367-8037  CHECK HERE IF PAID BY EFT	1. VA Income Tax Withheld 2. Previous Period(s) Adjustment (See Instructions) 3. Adjusted Total 4. Payments made during the period of this return
FOR PERIOD ENDING DUE DATE ACCOUNT NUMBER FEIN	5. Balance tax due this quarter  6. Penalty (See Instructions)  7. Interest (See Instructions)  8. Payment for month following the period of this return
I declare that this return (including any accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is a true, correct and complete return.  SIGNATURE  DATE  TELEPHONE NUMBER	9. Total Amount Due